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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number **PU030052**  
First Named Inventor **Guillaume Bichot**

**COMPLETE IF KNOWN**

Application Number **/**  
Filing Date  
Group Art Unit  
Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**QUALITY OF SERVICE CONTROL IN A WIRELESS LOCAL AREA NETWORK**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|--|--------------------------|--------------------------|--------------------------|
|                                     |         |  |                          | YES                      | NO                       |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
|                       |                          |  |

Page 1 of 3

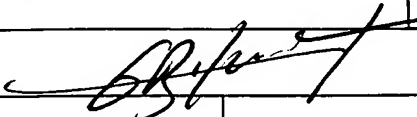
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| USA   |  | 609-734-6834  |  | (609) 734 - 6888  |  |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |  |   |  |   |  |
| <b>NAME OF SOLE OR FIRST INVENTOR:</b>  |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |   |  |
| <b>Given Name</b>   |  | <b>Family Name or Surname</b>   |  |   |  |
| GUILLAUME   |  | BICHOT  |  |   |  |
| <b>Inventor's Signature</b>   |  |   |  | <b>Date</b>   |  |
|    |  |   |  | 11/10/2003  |  |
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| <b>NAME OF SECOND INVENTOR:</b>   |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |   |  |
| <b>Given Name</b>   |  | <b>Family Name or Surname</b>   |  |   |  |
| JUNBIAO   |  | ZHANG   |  |   |  |
| <b>Inventor's Signature</b>   |  | <b>Date</b>   |  |   |  |
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| USA   |  |   |  |   |  |
| <input type="checkbox"/> Additional Inventors are being named on the __ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.  |  |   |  |   |  |

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| <b>Country</b> | <b>Telephone</b>       | <b>Fax</b>       |  |
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventor

|                                |   |
|--------------------------------|---|
| <b>Given Name</b><br>GUILLAUME | <b>Family Name or Surname</b><br>BICHOT |
|--------------------------------|---|

|  |              |                          |                              |
|--|--------------|--------------------------|------------------------------|
| <b>Inventor's Signature</b>                    |              |                          | <b>Date</b>                  |
| <b>Residence: City</b><br>la Chapelle Chaussee | <b>State</b> | <b>Country</b><br>FRANCE | <b>Citizenship</b><br>FRANCE |

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|-------------------------------------|--------------|------------|--------------------------|

**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor

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|------------------------------|--|

|   |                        |                       |                             |
|---|------------------------|-----------------------|-----------------------------|
| <b>Inventor's Signature</b><br><i>Je no</i> | <b>Date</b><br>10/3/03 |                       |                             |
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|----------------------------|--------------------|---------------------|-----------------------|

☐ Additional inventors are being named on the \_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number

Filing Date

First Named Inventor

Guillaume Bichot, et al.

Title

Quality of Service Control in a  
Wireless Local Area Network

Art Unit

Examiner Name

Attorney Docket Number

PU030052

I hereby appoint:

☒ Practitioners at Customer Number

Customer Number 24498

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
|      |                     |
|      |                     |
|      |                     |
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|      |                     |

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OR

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Individual Name

Joseph J. Laks, Vice President

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Robert B. Levy, Registration No.: 28,234

Signature

Date

3/23/06

Telephone

609-734-6820

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

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France

do hereby grant

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Vice President  
Thomson Licensing Inc.  
Two Independence Way  
Princeton, New Jersey 08540

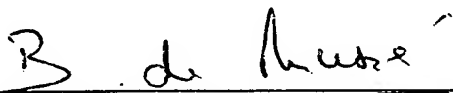
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DATED this \_\_\_\_14th\_\_\_\_ day of \_\_February\_\_, in the year 2006.

Signature:

Typed Name As Signed:

Title:

  
Béatrix de Russé  
Authorized Representative,  
Vice-President Intellectual Property & Licensing

THOMSON LICENSING

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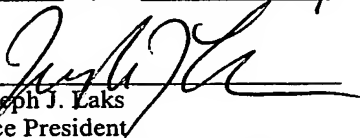
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Ronald H. Kurdyla - Sr. Patent Counsel/Manager  
Robert D. Shedd - Sr. Patent Counsel/Manager  
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*Princeton, New Jersey 08540*

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005.

DATED this 27<sup>th</sup> day of February, 2006.

SIGNED

  
Joseph J. Laks  
Vice President  
Thomson Licensing Inc. and  
Attorney In Fact for  
THOMSON LICENSING

WITNESS

